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CONFIRMATION NO. 7433

SERIAL NUMBER 09/671,764	FILING OR 371(c) DATE 09/27/2000 RULE	CLASS 514	GROUP ART UNIT 1656	ATTORNEY DOCKET NO. UCLA-P041 /2000-093-1
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APPLICANTS
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**** CONTINUING DATA *******
 This appln claims benefit of 60/156,491 09/28/1999 *CMK*

**** FOREIGN APPLICATIONS *******
None CMK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
 ** 11/15/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 6	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>CA</i> <i>CMK</i> Examiner's Signature Initials				

ADDRESS
22434

TITLE
Use of pentagastrin to inhibit gastric acid secretion or as a diuretic

FILING FEE RECEIVED 559	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
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